									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2003								D	10716012				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			3					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		١.	BASIC FE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			3 minus 20=		• 11			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			Ç minus 3 =		* 3			X43=		OR	X86=		
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							<u>.</u>	SMALL	. ENTITY	or	OTHER SMALL		
ENTA		CLAIMS REMAINING AFTER AMENDMENT		PREVIO	IGHEST UMBER PRESENT EVIOUSLY EXTRA			RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	- 20	Minus	2	37	2		X\$ 9=		OR	X\$18=	·	
ME	Independent	7	Minus	***	6	= / .		X43=		OR	X86=		
4	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM			-448	1		+290=		
								+145=	ļ	OR	TOTAL		
1101-01								ADDIT, FEE	- 8	OR	ADDIT FEE		
1/-20-06 (Column 1) (Column 2) (Column 3)													
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER WSLY	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
X O	Total	. 6	Minus	- 3	1	=		X\$ 9₽		OR	X\$18=		
MEI	Independent	. 2	Minus	*** 6		 -		X43=		OR	X86=		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	ENDENT	CLAIM .		1	+145=		OR	+290≐		
M .								YOTAL		ÒR:	TOTAL		
		(Column 1)	14	(Colum	nn 21	(Column 3)	4	ADDIT. FEE		•	ADDIT, FEET		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	est IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		- .		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		=		X43=			X86=		
۶	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	ENDENT	CLAIM		ľ			OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+290=		
	f the "Highest Nur If the "Highest Nur	mber Previously Pa mber Previously Pa	id For IN THE id For IN THE	S SPACE is S SPACE is	less that less that	n 20, enter "20." n 3, enter "3."	•	ADDIT. FEE			TOTAL ADDIT. FEE		
1	The "Highest Num	ber Previously Paid	! For" (Total or	Independe	nt) is the	highest numbe	r tou	ing in the ap	brobuste pox	in cof	umn 1.	1.	